

Polis	Schrader	Titus
Price (NC)	Schwartz	Tonko
Quigley	Scott (VA)	Tsongas
Rahall	Scott, David	Upton
Rangel	Serrano	Van Hollen
Richmond	Sewell (AL)	Vargas
Roybal-Allard	Shea-Porter	Veasey
Royce	Sherman	Vela
Ruiz	Sinema	Velázquez
Ruppersberger	Sires	Visclosky
Rush	Slaughter	Walz
Ryan (OH)	Smith (WA)	Wasserman
Sánchez, Linda	Speier	Schultz
T.	Swalwell (CA)	Waters
Sanchez, Loretta	Takano	Waxman
Sarbanes	Terry	Welch
Schakowsky	Thompson (CA)	Wilson (FL)
Schiff	Thompson (MS)	Wolf
Schneider	Tierney	Yarmuth

NAYS—207

Aderholt	Graves (GA)	Perry
Amash	Graves (MO)	Petri
Amodei	Griffin (AR)	Pittenger
Bachmann	Griffith (VA)	Pitts
Bachus	Grimm	Poe (TX)
Barletta	Guthrie	Posey
Barr	Hall	Price (GA)
Barton	Hanna	Reed
Benishek	Harris	Reichert
Bentivolio	Hartzler	Renacci
Bilirakis	Hastings (WA)	Ribble
Black	Hensarling	Rice (SC)
Blackburn	Herrera Beutler	Rigell
Boustany	Holding	Roby
Brady (TX)	Hudson	Roe (TN)
Bridenstine	Huelskamp	Rogers (AL)
Brooks (AL)	Huizenga (MI)	Rogers (KY)
Brooks (IN)	Hultgren	Rohrabacher
Broun (GA)	Hunter	Rokita
Buchanan	Hurt	Rooney
Buchon	Issa	Ros-Lehtinen
Burgess	Jenkins	Roskam
Byrne	Johnson (OH)	Ross
Calvert	Johnson, Sam	Rothfus
Camp	Jolly	Runyan
Cantor	Jones	Ryan (WI)
Carter	Jordan	Salmon
Cassidy	Joyce	Sanford
Chabot	Kelly (PA)	Scalise
Chaffetz	King (IA)	Schock
Clawson (FL)	King (NY)	Schweikert
Coble	Kinzinger (IL)	Scott, Austin
Coffman	Kline	Sensenbrenner
Cole	Labrador	Sessions
Collins (GA)	LaMalfa	Shimkus
Collins (NY)	Lamborn	Shuster
Conaway	Lance	Simpson
Cook	Lankford	Smith (MO)
Cotton	Latham	Smith (NE)
Cramer	Latta	Smith (NJ)
Crawford	Long	Smith (TX)
Crenshaw	Lucas	Southerland
Culberson	Luetkemeyer	Stewart
Daines	Lummis	Stivers
Davis, Rodney	Marino	Stockman
DeSantis	Massie	Stutzman
Diaz-Balart	McAllister	Thompson (PA)
Duffy	McCarthy (CA)	Thornberry
Duncan (SC)	McCaul	Tipton
Duncan (TN)	McClintock	Turner
Ellmers	McHenry	Valadao
Farenthold	McKeon	Wagner
Fincher	McKinley	Walberg
Fleischmann	McMorris	Walden
Fleming	Rodgers	Walorski
Flores	Meadows	Weber (TX)
Forbes	Meehan	Webster (FL)
Fortenberry	Messer	Wenstrup
Foxx	Mica	Westmoreland
Franks (AZ)	Miller (FL)	Williams
Frelinghuysen	Miller, Gary	Wilson (SC)
Gardner	Mullin	Wittman
Garrett	Mulvaney	Womack
Gerlach	Murphy (PA)	Woodall
Gibbs	Neugebauer	Yoder
Gohmert	Noem	Yoho
Goodlatte	Nugent	Young (AK)
Gosar	Nunes	Young (IN)
Gowdy	Olson	
Granger	Paulsen	

NOT VOTING—20

Bass	Gingrey (GA)	Kingston
Bishop (UT)	Hanabusa	Lewis
Campbell	Heck (WA)	Marchant
Capito	Honda	Meeks
DesJarlais	Jackson Lee	

Nunnelee	Pompeo	Tiberi
Palazzo	Rogers (MI)	Whitfield

□ 1743

So the motion to instruct was rejected.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

HOURLY MEETING ON TOMORROW

Mr. LAMBORN. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 10 a.m. tomorrow.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Colorado?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H.R. 4098

Mr. CLAY. Mr. Speaker, I ask unanimous consent to remove my name as a cosponsor from H.R. 4098.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

NOTICE OF INTENTION TO OFFER MOTION TO INSTRUCT CONFEREES ON H.R. 3230, PAY OUR GUARD AND RESERVE ACT

Mr. RAHALL. Mr. Speaker, pursuant to clause 7(c) of rule XXII, I hereby give notice of my intention to offer a motion to instruct conferees on H.R. 3230, the conference report on Veterans Access and Accountability.

The form of the motion is as follows:

Mr. Rahall moves that the managers on the part of the House at the conference on the disagreeing votes of the two Houses on the House amendment to the Senate amendment to the bill H.R. 3230 (an Act to improve the access of veterans to medical services from the Department of Veterans Affairs, and for other purposes) be instructed to—

(1) recede from disagreement with section 203 of the Senate amendment (relating to the use of unobligated amounts to hire additional health care providers for the Veterans Health Administration); and

(2) recede from the House amendment and concur in the Senate amendment in all other instances.

The SPEAKER pro tempore. The gentleman's notice will appear in the RECORD.

MOTION TO INSTRUCT CONFEREES ON H.R. 3230, PAY OUR GUARD AND RESERVE ACT

Ms. BROWNLEY of California. Mr. Speaker, I have a motion at the desk.

The SPEAKER pro tempore. The Clerk will report the motion.

The Clerk read as follows:

Ms. Brownley of California moves that the managers on the part of the House at the conference on the disagreeing votes of the two Houses on the House amendment to the Senate amendment to the bill H.R. 3230 (an

Act to improve the access of veterans to medical services from the Department of Veterans Affairs, and for other purposes) be instructed to—

(1) recede from disagreement with title V of the Senate amendment (relating to health care related to sexual trauma); and

(2) recede from the House amendment and concur in the Senate amendment in all other instances.

The SPEAKER pro tempore. Pursuant to clause 7(b) of rule XXII, the gentlewoman from California (Ms. BROWNLEY) and the gentleman from Colorado (Mr. LAMBORN) each will control 30 minutes.

The Chair recognizes the gentlewoman from California.

Ms. BROWNLEY of California. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today to express my strong support for the military sexual trauma provisions that were included in the Senate-passed H.R. 3230 and to urge my colleagues to vote "yes" on the motion to instruct conferees to accept these provisions.

As you know, the statistics on military sexual assault are staggering. In 2012, a Pentagon survey estimated that 26,000 women and men were sexually assaulted. However, the Pentagon only received 3,374 formal allegations. Clearly, there remains a deep-seated cultural problem in the military that discourages our servicemen and -women from coming forward to report cases of sexual assault.

Nonetheless, if one counts those cases reported, more and more men and women are currently leaving the military with PTSD from sexual assault. This cannot continue. Military sexual assault is the ultimate violation of the basic principles of trust, respect, honor, and dignity that is the bedrock of the principles our military men and women expect and deserve, and they are principles our country rightly demands.

Changing culture, as anyone from the public or private sectors know, and those of us dealing with issues at the Veterans Administration know all too well, changing culture is very difficult. But the culture of our military must change, and we, my colleagues, need to accelerate that change, from the military chain of command to reforms of our military justice system.

Clearly, preventing military sexual assault in the first place is critical, but it is equally critical that we provide servicemembers leaving the military who have suffered from sexual assault, to make access to care at the VA easier and safer, to make sure survivors get the benefits and services they need, and to ensure that the VA provides the very best treatment possible.

Compassion and care are a critical part of healing for those who have been sexually assaulted. We need an environment where it is safe to speak up and where we would never find anyone's story unjustly dismissed or treated with indifference, which would only make the trauma and the wound even deeper.

We have a bill before us that provides relief not only for those who have endured sexual assault, but for so many of the issues facing our veterans at this very moment.

I deeply appreciate the leadership from our chairman on the committee, who has done a tremendous amount to help our veterans, and he continues to do so. But the time to act is now. The crisis is clear. We have a path to address it. We have veterans who deserve it, and we have a Congress willing to provide the resources needed.

We have said time and time again in our hearings we need big change and big ideas. We need real transformation, and, most importantly, we need a VA whose sole purpose and mission is to serve our veterans with the same vigor and sacrifice that our veterans have served our country.

Mr. Speaker, our veterans must come first in everything we do. There is a lot of work ahead of us that the VA needs to do, and our committee must continue to do so. Persistent and consistent oversight every step of the way on our part will leverage the leadership and the strategic plan from within the VA to ensure that we deliver timely and quality health care with a compassion that our veterans and their families have earned and deserve.

I have no doubt that the leadership of the chairman has been instrumental to our committee's being able to work together in a bipartisan fashion to get us to this point, and it is imperative that we continue to work in a bipartisan fashion. Our veterans are counting on us, and our country is counting on us.

As ranking member of the House Veterans' Affairs Subcommittee on Health and someone who has respected all of the work of the committee on these issues, it is my belief that our veterans simply cannot and should not wait another day.

We have a bill that the Senate has passed and that we know the House would pass. We are currently scheduled by the Speaker to recess next Thursday. If the Speaker keeps to that timeline, we need to accept what is on the table: a bill that we know can pass both Houses and that we know the President will sign so that our veterans receive the care they deserve. We must include the provisions to improve VA treatment for survivors of military sexual trauma.

Mr. Speaker, I urge my colleagues to vote "yes" on the motion to instruct conferees, and I reserve the balance of my time.

Mr. LAMBORN. Mr. Speaker, I rise in opposition to this motion to instruct and yield myself such time as I may consume.

Mr. Speaker, the motion to instruct would require the House to recede to the Senate amendments to H.R. 3230. As Chairman MILLER has stated during debate on nearly identical motions to instruct last week and again last night, the foremost goals of the House and Senate conference committee are, one,

to improve timely access to high-quality health care for veterans who have been waiting for weeks, months, or even years; and, two, to improve the accountability and overall operations of the Department of Veterans Affairs health care system. This was the central charge to the conferees at the beginning of the conference and remains so today. I have no doubt that my colleague from California, Congresswoman BROWNLEY, the ranking member of the Subcommittee on Health, shares these goals. However, this motion does not further our pursuit of them.

Tonight, our attention is best spent devoted to finding a true compromise—one that best serves our Nation's veterans and taxpayers and lays the foundation for correcting the departmental deficiencies that have brought us here—and not tying the conference committee's hands with an unnecessary, unhelpful, unbinding, and time-consuming motion to instruct.

As the gentlewoman knows, because she was in the Veterans' Affairs Committee hearing with the acting VA Secretary, this morning, Chairman MILLER offered a proposal that would largely agree with nearly everything in the Senate bill, with a few minor exceptions.

Chairman MILLER's proposal would accept title I through title VII of the original Senate bill, with amended language to include all 27 leases authorized by the House last December in H.R. 3521 rather than the 26 that the Senate approved; provide VA with \$102 million for fiscal year 2014 to address the Department's internal funding shortfalls; provide \$10 billion of no-year, mandatory, emergency funding to cover the cost of the Senate's choice provisions, with the remaining Senate provisions subject to appropriations.

Mr. Speaker, I am supportive of Chairman MILLER's proposal because it is a fair, commonsense approach that ensures Congress is able to continue its oversight to ensure that taxpayers' funds are spent wisely.

As we all know, recently, Senator SANDERS, chairman of the Senate Veterans' Affairs Committee and cochair of the conference committee, has indicated his desire to expand the scope of the conference to include VA's recent request for an additional \$17.6 billion. We call that an airdrop. Unfortunately, there is virtually no parachute in the form of detailed justification for this request, and to a great extent, Congress' acceptance of unsubstantiated funding requests in the past have helped get us to where we are today.

This summer, the House Veterans' Affairs Committee has held multiple full committee oversight hearings to discuss the access and accountability failures VA has been subjecting our veterans to. These hearings have confirmed that the problems VA is facing today require long-term and large-scale reform. Adding more money, more people, and more infrastructure

to a system that has not proven itself able to make effective use of its existing resources that it has been provided without first implementing underlying reforms does not serve our veterans well and will not prevent them from continuing to face unacceptably long patient waiting times.

It has been proven time and time again by the VA inspector general, the Government Accountability Office, the administration, and others that VA has been suffering from widespread data manipulation and a systemic lack of integrity.

Given that, what confidence do we have that the \$17.6 billion resource request that VA is now making is based on data that is valid or reliable, particularly given that the committee has received very little analysis, justification, or verification of these numbers?

Before Congress can contemplate devoting such a significant amount of taxpayer money, it is imperative that VA provide a full accounting of each additional dollar that is being requested. The resource request the Department has put forward so far is not the well thought-out and thoroughly justifiable position that our Nation's veterans and our taxpayers deserve. Rather, it is an unsubstantiated guess put together in the back room of a massive bureaucracy.

Mr. Speaker, I truly believe we could have already come to an agreement if Senator SANDERS would not have insisted on moving the goalposts so dramatically. The House has passed almost a dozen bills reforming the VA that have waited months for Senate consideration. The Senate could pass those bills and send them to the President to become law today.

I would remind Ms. BROWNLEY that one such bill, H.R. 2527, would extend VA's military sexual trauma counseling, along with care and treatment programs, for veterans for sexual trauma that occurred during Active Duty or Active Duty for training to veterans who experienced such trauma during inactive duty training.

□ 1800

Mr. Speaker, we are continually trying to work out a deal with the Senate, but I would submit to this body these motions to instruct are unproductive, are slowing down the conference process, and have become nothing more than a political ploy to distract from the true issues facing our veterans and the conference committee.

So with that, I urge my colleagues to vote "no" on the motion to instruct.

I reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I just want to recognize my colleague, the gentleman from Colorado. He has worked hard on this committee. I want to make clear that what we are talking about today is the bill that passed the Senate 93-3. So we are not talking about an airdrop or moving the goalpost; we are talking about the bill that passed out of the Senate 93-3.

At this time, Mr. Speaker, I yield 3 minutes to the gentlewoman from Nevada (Ms. TITUS) who has been a leader on this issue and introduced the Military Sexual Trauma Claims Administration Reform and Eligibility Act.

Ms. TITUS. Mr. Speaker, I would like to thank my colleague from California for yielding to me, and for addressing this important issue of coverage for victims of sexual assault in the National Guard.

I rise in support of the Brownley motion to instruct. As you have heard described, this proposal addresses an unacceptable gap in current law that effectively leaves some victims of military sexual assault without the support and treatment they need.

Members of the National Guard and other reserve components of the armed services have fought bravely for our country, many completing numerous tours of duty in Iraq and Afghanistan. Since the attacks on September 11, more than 50,000 guardsmen and guardswomen have been called to service both at home and abroad. We recognize the value of their service, of the National Guard, and of other reserve components, and we thank them for their sacrifice.

Unfortunately, some guardsmen and -women, like other members of the armed services, are victimized by sexual assault while on Active Duty. If that happens, they are provided all of the VA resources and services they need to recover and heal, physically and emotionally. These benefits, however, are not offered to members of the National Guard or other reserve components who experience sexual assault while on inactive training missions. For example, members of the Guard are required to participate in training missions one weekend a month and two weeks a year, but benefits and services, such as counseling and medical care, do not extend to victims sexually assaulted during those mandatory training missions. This oversight is simply unacceptable and leaves so many who have served our country so bravely without assistance or support during a devastating time.

On May 28, the House unanimously agreed to a solution to this problem by passing legislation I introduced last year, the bipartisan National Guard Military Sexual Trauma Parity Act. This legislation is supported by a number of the leading veterans service organizations.

The National Guard Military Sexual Trauma Parity Act would fix this omission and clarify that all victims of sexual trauma in the National Guard or other reserve components have access to the care they need to help them recover from acts of sexual trauma while they are on inactive or reserve duty.

The Senate wisely included this language in the VA reform bill that passed their body 93-3, and it is important that this provision, which has been passed by the House already, be in-

cluded in the final version of the bill. I was pleased to hear it mentioned by our colleague from Colorado, so I am glad that there is support for keeping it in the conference report.

I encourage my colleagues to support the Brownley motion to instruct to ensure that all victims of sexual assault, regardless of what kind of duty they are on, have access to the care they need.

Mr. LAMBORN. I continue to reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I yield 3 minutes to the gentlewoman from New Hampshire (Ms. KUSTER), a valued and insightful member of the House Veterans' Affairs Committee.

Ms. KUSTER. Mr. Speaker, I thank Representative BROWNLEY for her friendship and for her commitment to our Nation's veterans.

I rise to support the Brownley motion to instruct the conferees on H.R. 3230. It has been one of the most humble honors for me to serve on the Veterans' Affairs committee, one of the most bipartisan committees in this Congress.

This week I had the honor to join my constituent, Sergeant Ryan Pitts, as he was awarded the Presidential Medal of Honor at the White House, and my husband and I joined Ryan and his wife, Amy, and their son, Luke, at the Pentagon as he was inducted into the Hall of Fame. He honored his colleagues, the chosen few who lost their lives in Afghanistan, and on his behalf and on their behalf it is a tremendous privilege for me to continue to work with my colleagues on both sides of the aisle in service to our Nation's veterans.

Mr. Speaker, we were all shocked and outraged when our committee uncovered long wait times, secret wait lists, and manipulated records at the Veterans Administration. When our men and women in uniform return home after fighting for our freedom, they should never ever have to fight just to receive the medical care that they have earned and they deserve. That is why I was proud to work with Republicans and Democrats to pass common-sense reforms to hold VA leaders accountable and increase access to care for our veterans.

I also partnered with the gentlewoman from Arizona (Mrs. KIRKPATRICK) to cosponsor legislation that puts forward even stronger VA reforms and which has already passed in the Senate. Both Chambers of Congress have passed bipartisan bills in response to the scandal at the VA, and now it is time to finish the job and reconcile this legislation.

We owe it to our veterans to stay right here in Washington and to work together until we can send a final bill to the President's desk to improve care for all our veterans. And we must ensure that this final legislation contains strong protections for veteran survivors of sexual trauma.

Mr. Speaker, sadly, sexual assault in our military is a full-blown epidemic. According to the Department of Defense, an estimated 26,000 servicemembers have suffered unwanted sexual contact in just 2012 alone. This is an outrage. When a young woman or a young man signs up to serve our country, they know that they may face danger in combat, but it is unacceptable that so many of these brave Americans are attacked every year by their own colleagues.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Ms. BROWNLEY of California. I yield an additional 30 seconds to the gentlewoman.

Ms. KUSTER. It is unacceptable that so many of our brave Americans are attacked every year by their own colleagues. And when survivors come forward, which only happens a fraction of the time, our flawed military justice system often turns a blind eye.

Mr. Speaker, I was proud to work across the aisle with our colleagues, JACKIE WALORSKI, LORETTA SANCHEZ, and many others to pass strong whistleblower protections into law and help prevent retaliation against those who bravely report these crimes. We need to continue to work together, and I implore our colleagues to join us in voting "yes" on the motion to instruct and to guarantee that our veterans will be protected.

I again partnered with Representative WALORSKI to introduce legislation to extend VA travel benefits to veterans travelling to seek treatment for injuries resulting from sexual trauma.

Republican and Democrat alike, so many of us fought to reform our military justice system and transfer authority to independent prosecutors.

And together, this House passed the Ruth Moore Act to help ensure that veterans suffering from sexual trauma have access to the services they need.

In a Congress bogged down by gridlock and partisanship, this issue has united both parties.

When working to rid our military of sexual assault, and to better serve its survivors, we have proven that Congress can still find common ground and solve problems.

So let's build on that progress and pass this motion, which would agree to Senate-passed language to expand VA services for the treatment of military sexual trauma.

In addition, this motion would improve coordination between the VA and Department of Defense.

These are goals that we can all support.

So I implore our colleagues—join us in voting yes, and let's continue the important work of protecting our service members from sexual assault, and guaranteeing only the best care for those veterans who suffered from these crimes.

Mr. LAMBORN. Mr. Speaker, I continue to reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I yield 3 minutes to the gentlewoman from Massachusetts (Ms. TSONGAS) who has been an extraordinary leader and champion, and also

the cochair of the Military Sexual Assault Prevention Caucus.

Ms. TSONGAS. Mr. Speaker, I thank Congresswoman BROWNLEY for allowing me to speak on this very worthwhile motion, and I rise in support.

Statistics from the Department of Veterans Affairs indicate that as many as one in five women are sexually assaulted while serving in the military. But receiving benefits from the VA remains a challenge.

Last year, the Service Women's Action Network, the Yale Law School Veterans Legal Services Clinic, the ACLU, and the ACLU of Connecticut released a report showing that veterans who experience sexual assaults have their benefits claims denied more than veterans with other types of PTSD. The report also found the rate of granting these claims varied greatly depending on the particular VA regional office. The St. Paul, Minnesota, office granted only 26 percent of the military sexual trauma claims they received, while the office in Los Angeles granted more than 88 percent of the claims they received.

Anyone who has seen the powerful documentary "The Invisible War" has anguished along with Kori Cioca. Kori survived a horrific sexual assault while serving, and suffered severe injuries to her face and jaw incident to the assault. She waited for years for an answer from the VA on the jaw surgery she needed, but her claim was ultimately and shockingly denied.

The VA has a long way to go when it comes to granting benefits for survivors of military sexual trauma. The Senate provisions in section 503 of the Senate bill would make sure that Congress is better informed on how the VA is treating military sexual trauma.

Section 503 would also address what the VA is doing for male victims of sexual assault. According to the Defense Department, by the numbers, men in the military are more often victims of sexual assault than women.

Yesterday, Senator GILLIBRAND of New York screened a documentary at Capitol Hill called "Justice Denied." In it, male victims tell the heart-wrenching stories of being sexually assaulted, and too often being ignored by their commands after they reported an attack and isolated by their fellow servicemembers for doing so. We must do a better job—a much better job—of protecting these men and taking care of them after these incidents. The Senate bill allows us to start to do that.

Finally, section 501 expands eligibility for counseling services which are so important to people healing. About 2 years ago, a woman veteran came to my office to talk to me about being sexually assaulted while she was in the military. She hadn't spoken to many people about what had happened to her before, and it was difficult to do so. But she had just come from a summit where she had met a number of survivors just like her who had had similar experiences. This opportunity to

meet people with similar stories and share their experiences strengthened her. She was similarly strengthened through counseling and group therapy. She has become more and more comfortable speaking about her story because of the treatment she has received. I have now seen her bravely telling her story to a rapt audience after a screening of "The Invisible War."

I urge a "yes" vote on this very important motion that will help to improve care to so many servicemembers.

Mr. LAMBORN. Mr. Speaker, I continue to reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I yield 3 minutes to the gentlewoman from California (Ms. SPEIER) who has been instrumental in reforming the Uniform Code of Military Justice in her role on the House Armed Services Committee.

Ms. SPEIER. Mr. Speaker, I thank my colleague from California, whom I am honored to serve with and who I want to compliment for bringing recognition to this issue and a spotlight on the importance of providing this service to veterans when they are no longer in Active Duty.

The reason why this particular section 503 is so critical is because so few of these survivors ever come forward when they are on Active Duty to speak about their sexual assault. In fact, the military in many respects encourages them not to come forward because oftentimes the result is, when you do come forward, you are labeled as having a personality disorder and then honorably but involuntarily discharged from the military.

The stories I have heard over the last 3 or 4 years are really very disturbing because it makes the case over and over again that the military does not really want to deal with this issue.

□ 1815

So 26,000 sexual assaults or sexual harassments that take place to members of the military every year. 5,000—only 5,000 of them report them, only 500 of them go to court-martial, and only 250 see any kind of time in jail or prison.

There are many of these victims who upon retiring, upon being discharged from the military, are into drugs and alcohol, and all of a sudden find out that what is really driving their conditions is the fact that they were raped when they were in the military.

I had the opportunity just last week to spend some time at the MST program in Menlo Park, California, with five survivors who were in an inpatient program. They were all extraordinarily grateful for the opportunity they had to participate in that program.

They found it to be a lifesaver, literally a lifesaver. They were all on the brink before being admitted into this particular program and for the first time feel that they are getting their lives back, but one of the great eye-

opening parts of that experience was that, of the five women, four of them would be homeless upon leaving this in-treatment program, which went on for about 45 days.

On top of everything else that we are learning about MST, I think it is important to recognize that survivors, particularly women survivors—but I believe it is true of men survivors as well—need to be in programs that are single-sex because they have so many issues associated with it and that we have got to find housing for them after they leave.

With that, I support the motion.

Mr. LAMBORN. Mr. Speaker, I continue to reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I yield 3 minutes to the gentlewoman from Texas (Ms. JACKSON LEE), who has also been a leader and advocate for justice for our survivors in the Judiciary Committee.

Ms. JACKSON LEE. Mr. Speaker, let me add my appreciation to Ms. BROWNLEY for her leadership on this issue and for the women that are on the floor who are members of the Veterans' Affairs Committee and members of the Armed Services Committee, who really have led this issue, which I believe all of America understands.

Let me thank Mr. LAMBORN, who is from Colorado and a member of the Veterans' Affairs Committee, and as we debate this motion to instruct, a personal plea to Mr. LAMBORN, that this is truly a reasoned response to the heinous number of women and some men in the United States military who have experienced traumatic sexual assault and trauma.

This is a simple motion to instruct. It asks us to cede to the provision in the Senate, which allows for the care, health care, under the veterans health care system, of those who have experienced sexual trauma.

As Ms. BROWNLEY has indicated, I am a senior member of the House Judiciary Committee, and we address these questions through the Judiciary Committee on issues of domestic violence and sexual assault and find ways, of course, to be able to respond to women who have been victimized.

We took a long time to pass the Violence Against Women Act, but the whole idea was to include an infrastructure to protect women who are frightened to come forward and to acknowledge the criminality of domestic violence and violence against women.

Can we do no less for the women in the United States military who put on the uniform and took an oath to swear allegiance to the United States and to extend their bodies on the front lines to be able to protect this Nation, can we not do any less than to offer to them simple health care when they come forward on sexual trauma?

Just a few years ago, I provided a PTSD center at one of my nonveteran or nonmilitary hospitals. It was overwhelmingly received by veterans who

were off campus and wanted to go to a place that was not as congested as a veterans hospital, but I will tell you that PTSD is truly a health phenomenon.

The distinctive sexual trauma that some of my colleagues have mentioned that women have hidden and never spoken about for years should not be rejected when they come forward finally because we have opened the system to be able to secure health care. They should not be, in essence, directed to a life of drug abuse and alcohol abuse because they are fearing. They should be able to get health care.

So I ask my colleagues, 26,000 and growing and others who are also involved, this is an important motion to instruct, and I congratulate, again, Ms. BROWNLEY. My heart breaks—as she served as the ranking member on the Health Subcommittee on Veterans' Affairs—my heart breaks that when you are abused, when your face is abused, when your body is abused, that is a health crisis.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Ms. BROWNLEY of California. I yield an additional 30 seconds to the gentlewoman from Texas.

Ms. JACKSON LEE. Having just come back from my community where two women and families have been killed through the violence of domestic violence, they live no more—but what about those who are soldiers who put on the uniform who are experiencing a lifelong experience of injuries and psychological trauma?

Mr. Speaker, I ask my colleagues to support this motion to instruct offered by my colleague, Ms. BROWNLEY. What more can we do or how much less can we do for women and men who put on the uniform who are suffering from sexual trauma? It must be part of the Veterans' Affairs health reform.

Mr. LAMBORN. Mr. Speaker, I continue to reserve the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, might I inquire if the gentleman from Colorado will have any additional speakers?

Mr. LAMBORN. Mr. Speaker, at this time, there are no plans to have any additional speakers.

Ms. BROWNLEY of California. Then I am prepared to close.

Mr. LAMBORN. Mr. Speaker, I once again urge all Members to oppose the motion to instruct, and I yield back the balance of my time.

Ms. BROWNLEY of California. Mr. Speaker, I yield myself such time as I may consume.

In closing, I would like to add that as ranking member of the Health Subcommittee, I led a hearing last July to address VA care and treatment for military sexual trauma survivors.

The subcommittee looked at the coordination of care and services offered by the Department of Defense and the VA. I was truly saddened to listen to the testimonies of those who spoke.

Their pain and suffering was evident in every word they spoke. I know it was hard for all of them to share their stories, and I know all of us understand the immense bravery it took for them to do so.

I know that all of us, including those who have come to speak today, are dedicated to addressing military sexual assault. The Senate bill takes an important step forward toward that end. It is but one very important reason why I call on my colleagues to support this motion to instruct.

Let's insist that the Department of Defense and the VA address the epidemic of military sexual assault, which must include appropriate care and treatment of trauma survivors, and let's adopt the language in the Senate bill that addresses military sexual trauma.

We have a bill before us that was crafted by Members of Congress whose dedication to our veterans is beyond question, but we are running out of time. We have a bill that we know will pass both Houses, that we know the President will sign, that we know will provide significant relief to our veterans immediately.

We simply cannot negotiate any longer. Time is of the essence. We should move forward. We should adopt the Senate bill.

I urge my colleagues to vote "yes" on the motion to instruct conferees, and, Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to instruct.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to instruct.

The question was taken; and the Speaker pro tempore announced that the yeas appeared to have it.

Ms. BROWNLEY of California. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

PERSONAL EXPLANATION

Ms. JACKSON LEE. Mr. Speaker, today, in my district, we buried Dr. Evelyn E. Thornton, the first African American to graduate from the University of Houston with a Ph.D. in math and a leader in civic matters and education.

Because of my responsibility of speaking at this civic leader's funeral home going service, I missed the following votes. Had I been present, I would have voted as follows:

On rollcall vote No. 442, I would have voted "no" on the motion on ordering the previous question on H.R. 4935 and H.R. 3393;

On rollcall vote No. 443, I would have voted "no" on H. Res. 680, a rule providing for the consideration of H.R.

4935, Child Tax Credit Improvement Act, and H.R. 3393, Student and Family Tax Simplification Act;

On rollcall vote No. 444, I would have voted "yes" on an amendment to H.R. 4984, Empowering Students Through Enhanced Counseling Act, offered by Mr. KILMER and Mr. HINOJOSA;

On rollcall vote No. 445, I would have voted "yes" on a motion to recommit H.R. 4984, Empowering Students Through Enhanced Counseling Act;

On rollcall vote No. 446, I would have voted "yes" on final passage of H.R. 4984, Empowering Students Through Enhanced Counseling Act;

On rollcall vote No. 447, I would have voted "yes" on H.R. 5111, to improve the response to victims of sex trafficking, by Representative BEATTY;

On rollcall vote No. 448, I would have voted "yes" on a motion to recommit on H.R. 3933, Student and Family Tax Simplification Act;

On rollcall vote No. 449, I would have voted "no" on H.R. 3393, Student and Family Tax Simplification Act; and

On rollcall vote No. 450, I would have voted "yes" on H.R. 3230, Veterans' Access to Care Through Choice, Accountability, and Transparency Act of 2014.

16TH ANNIVERSARY OF CAPITOL SHOOTING

(Mr. MURPHY of Pennsylvania asked and was given permission to address the House for 1 minute.)

Mr. MURPHY of Pennsylvania. Mr. Speaker, earlier today, the House observed a moment of silence to remember the loss of two heroes who gave their lives to protect others.

The deaths of Detective John Gibson and Officer Jacob Chestnut are heartbreaking. An additional tragedy, however, is that this House has not taken action to prevent such incidents from happening again.

The man who took the lives of the two police officers had paranoid schizophrenia and had previously been committed to a psychiatric hospital after threatening to kill the President, a hospital technician, and his neighbors. His paranoid delusions told him to attack the Capitol. Weston cycled in and out of emergency rooms as he refused medication and followup treatment.

We know that the perpetrator had a brain disease, but our broken mental health system prevents others like Weston from being treated. The sad truth of this situation is it won't be long before we read in the headlines of another preventable tragedy.

The memories of Detective Gibson and Officer Chestnut deserve our respect, their families our gratitude, but all families deserve our action.

We must pass H.R. 3717, the Helping Families in Mental Health Crisis Act, because where there is no help there is no hope.